



FEES TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

<input type="checkbox"/> Applicant claims small entity status.	Group Art Unit	2614
Total Amount of Payment: (\$900)	Attorney Docket No.	SUN-P6047-1

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)			
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order				3. ADDITIONAL FEES			
FEE CALCULATION				Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1. BASIC FILING FEE				Fee (\$)	Fee (\$)		
Large Entity Fee Code		Small Entity Fee Code					
1001	790	2001	395	Utility filing fee			
1002	350	2002	175	Design filing fee			
1003	550	2003	275	Plant filing fee			
1004	790	2004	395	Reissue filing fee			
1005	160	2005	80	Provisional filing fee			
SUBTOTAL (1) (\$)				1051	130	2051	65
				1052	50	2052	25
				1251	110	2251	55
				1252	430	2252	215
				1253	980	2253	490
				1254	1,530	2254	765
				1255	2,080	2255	1,040
				1501	1,370	2501	685
				1814	110	2814	55
				1502	490	2502	245
				1460	130	1460	130
				1806	180	1806	180
				8021	40	8021	40
				1809	790	2809	395
				1801	790	2801	395
							SUBTOTAL (3) (\$)
							900
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE							
Extra Claims Tot. Claims <input type="text"/> -20** = <input type="text"/> x <input type="text"/> = <input type="text"/> Ind. Claims <input type="text"/> -3** = <input type="text"/> x <input type="text"/> = <input type="text"/> Multiple Dependent <input type="text"/> = <input type="text"/>				Fee from below	Fee Paid		
Large Entity Fee Code 1202 18 2202 9 1201 88 2201 44 1203 300 2203 150 1204 88 2204 44 1205 18 2205 9				Fee Description			
				Claims in excess of 20			
				Ind. claims in excess of 3			
				Multiple dependent claim, if not paid			
				** Reissue independent claims over original patent			
				** Reissue claims in excess of 20 and over original patent			
				SUBTOTAL (2) (\$) <input type="text"/>			
**or number previously paid, if greater; for Reissues, see above.							

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
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Signature			Telephone
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CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the U. S. Postal Service as <input type="checkbox"/> Express Mail or <input checked="" type="checkbox"/> First Class Mail in an envelope addressed to: Mail Stop RCE; Commissioner for Patents; P.O. Box 1450; Alexandria, VA 22313-1450 on 11/12/2004.			
Type or Printed Name	Teresa A. Fleming	Signature	